

## County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration 500 West Temple Street, Room 713, Los Angeles, California 90012 (213) 974-1101 http://ceo.lacounty.gov

March 1, 2010

Board of Supervisors GLORIA MOLINA First District

MARK RIDLEY-THOMAS Second District

ZEV YAROSLAVSKY Third District

DON KNABE Fourth District

MICHAEL D. ANTONOVICH

Fifth District

From:

To:

All Department Heads

William T Fujioka Chief Executive Officer

CORRECTIVE ACTION PLAN/SUMMARY CORRECTIVE ACTION PLAN REVIEW AND PRE-APPROVAL BY RISK MANAGEMENT INSPECTOR GENERAL

Effective April 1, 2010, the Chief Executive Office (CEO) Risk Management Inspector General (RMIG) will implement a program to pre-approve all Corrective Action Plans (CAPs) and Summary Corrective Action Plans (SCAPs) before the documents are submitted to the Claims Board and/or Board of Supervisors (Board). This includes all tort indemnity settlements over \$20,000 and medical malpractice settlements over \$100,000. The current requirement for development and submission of CAP/SCAPs remains unchanged. A SCAP, and when applicable, a CAP, must be submitted along with the proposed liability settlement to the Claims Board and/or Board for their consideration.

## New Requirements for CAP and SCAP Approval

The department will submit the CAP and/or SCAP to RMIG 30 days prior to the Claims Board meeting and, for cases that are not reviewed by the Claims Board, the CAP/SCAP will be submitted no later than 30 days prior to the Board meeting where the settlement will be presented. However, the CAP/SCAP review by RMIG can occur earlier in the claim process. Without RMIG's pre-approval, the CAP/SCAP will not be reviewed by the Claims Board and/or Board.

The process of investigating adverse events, identifying root causes, selecting and implementing appropriate corrective actions, and monitoring their implementation should start as soon as the department becomes aware of an adverse event. CAPs and SCAPs should be developed well in advance of most settlements.

The CAP/SCAP review by RMIG will consist of an evaluation of the identified root causes and corrective action steps to determine if all applicable root causes are identified and if the recommended CAP steps will mitigate, control, or abate the causal factors. In order to support this initiative, the existing SCAP form has been modified to include a CEO signature box (see attached).

"To Enrich Lives Through Effective And Caring Service"

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In the event there is a disagreement with RMIG related to identified root causes and appropriate corrective actions, the department's Risk Management Coordinator can request a technical review of the CAP and/or SCAP by contacting the County Risk Manager no later than ten (10) business days prior to the Claims Board and/or Board meeting where the case will be presented. Requests can be made to:

Steven E. NyBlom, Manager, CEO
Chief Executive Office
Risk Management Branch
3333 Wilshire Boulevard, Suite 820
Los Angeles, CA 90010

Phone: (213) 351-5346 Fax: (213) 252-0405

Email: snyblom@ceo.lacounty.gov

If a resolution cannot be reached, the issues will be referred to the appropriate Department Head and Deputy Chief Executive Officer, and/or to my office.

The RMIG review process must be initiated by your department's staff in a timely manner to minimize the potential for the CAP and/or SCAP approval process to impact the timing of the submission of a proposed settlement to the Claims Board and/or Board.

Additional information, including the updated SCAP form, is available on the CEO Risk Management intranet site at: <a href="http://riskmanagement.mylacounty.info">http://riskmanagement.mylacounty.info</a>. The CAP/SCAP related information is under the "Risk Management Inspector General" link.

If you have any questions, please have your staff contact Ellen Sandt at (213) 974-1186 or <a href="mailto:esandt@ceo.lacounty.gov">esandt@ceo.lacounty.gov</a>.

WTF:ES SN:JS:sg

Attachment

c: Each Supervisor
Claims Board
All Deputy Chief Executive Officers
All Administrative Deputies

Case Name:		
Case Name.		



## **Summary Corrective Action Plan**

Date of incident/event:

of the incident/event:

Briefly provide a description

The intent of this form is to assist departments in writing a corrective action plan summary for attachment to the settlement documents developed for the Board of Supervisors and/or the County of Los Angeles Claims Board. The summary should be a specific overview of the claims/lawsuits' identified root causes and corrective actions (status, time frame, and responsible party). This summary does not replace the Corrective Action Plan form. If there is a question related to confidentiality, please consult County Counsel.

1.	Briefly describe the <u>root cause(s)</u> of the claim/lawsuit:				

	Briefly describe recommended corrective actions: (Include each corrective action, due date, responsible party, and any disciplinary actions if appropriate)				
3. Sta	State if the corrective actions are applicable to only your department or other County departments: (If unsure, please contact the Chief Executive Office Risk Management Branch for assistance)				
	Potentially has Countywide implications.				
	Potentially has an implication to other departments (i.e., all human services, all safety departments, or one or more other departments).				
	Does not appear to have Countywide or other department(s) in	nplications.			
Name:	(Risk Management Coordinator)				
Signatu	re:	Date:			
Name:	(Department Head)				
Signature:		Date:			
		1			
Chief Ex	ecutive Office Risk Management Branch				
Name:					
Signatu	re:	Date:			
:Risk Mat. Ir	spector General/CAP-SCAP-RECAP/Summary Corrective Action Plan Form 2-01-10 (Final	),docx			

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